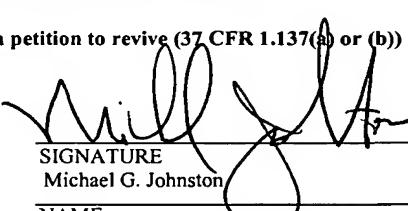


|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                       |                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------|
| FORM PTO-1390)<br>(REV. 10-2003)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE |                                       | ATTORNEY'S DOCKET NUMBER<br>014442-000022                           |
| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>CONCERNING A FILING UNDER 35 U.S.C. 371</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                         |                                       | U.S. APPLICATION NO. (If known, see 37 CFR 1.5)<br><b>10/516381</b> |
| INTERNATIONAL APPLICATION NO.<br>PCT/EP03/05753                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | INTERNATIONAL FILING DATE<br>02 June 2003               | PRIORITY DATE CLAIMED<br>May 31, 2002 |                                                                     |
| <b>TITLE OF INVENTION</b><br><b>METHOD FOR THE PROTECTION OF ENDOTHELIAL AND EPITHCLIAL CELLS DURING CHEMOTHERAPY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                         |                                       |                                                                     |
| <b>APPLICANT(S) FOR DO/EO/US</b><br><b>Guenther Eissner; Ernst Holler</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                         |                                       |                                                                     |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                       |                                                                     |
| <p>1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a filing under 35 U.S.C. 371.</p> <p>3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2))<br/>       a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).<br/>       b. <input checked="" type="checkbox"/> has been communicated by the International Bureau.<br/>       c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office(RO/US)</p> <p>6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).<br/>       a. <input type="checkbox"/> is attached hereto.<br/>       b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</p> <p>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))<br/>       a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).<br/>       b. <input type="checkbox"/> have been communicated by the International Bureau.<br/>       c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.<br/>       d. <input checked="" type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p> |                                                         |                                       |                                                                     |
| <b>Items 11 to 20 below concern document(s) or information included:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                       |                                                                     |
| <p>11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input checked="" type="checkbox"/> A preliminary amendment.</p> <p>14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A substitute specification.</p> <p>16. <input type="checkbox"/> A power of attorney and/or address letter.</p> <p>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 35 U.S.C. 1.821 - 1.825.</p> <p>18. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).</p> <p>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p> <p>20. <input type="checkbox"/> Other items or information: Check in the Amount of \$636.00, Copy of WO 03/101468 A1, Express Mail Certificate and Acknowledgment Postcard.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                         |                                       |                                                                     |

| U.S. APPLICATION NO. (If known, see 37 CFR 1.5)<br><b>10/516381</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | INTERNATIONAL APPLICATION NO.<br><b>PCT/EP03/05753</b> | ATTORNEY'S DOCKET NUMBER<br><b>014442-000022</b> |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------|--------------------------------------|--------------|--------------|------|--------------|-----------|----|-----------|--------------------|---------|---|-----------|-----------------------------------------------------|--|--|------------|--|--|--|--------------------------------------|--|--|--|------------------|
| <p>21. <input checked="" type="checkbox"/> The following fees are submitted:</p> <p><b>BASIC NATIONAL FEE (37 CFR 1.492(a) (1) - (5)):</b><br/>Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO.....\$1080.00</p> <p>International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO.....\$950.00</p> <p>International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2)) paid to USPTO.....\$770.00</p> <p>International preliminary examination fee (37 CFR 1.482) paid to USPTO but all claims did not satisfy provisions of PCT Article 33(1)-(4).....\$730.00</p> <p>International preliminary examination fee (37 CFR 1.482) paid to USPTO and all claims satisfied provisions of PCT Article 33(1)-(4).....\$100.00</p> |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <b>ENTER APPROPRIATE BASIC FEE AMOUNT =</b><br><input style="width: 100px; border: 1px solid black;" type="text" value="950.00"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <p>Surcharge of <b>\$130.00</b> for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">CLAIMS</th> <th style="width: 25%;">NUMBER FILED</th> <th style="width: 25%;">NUMBER EXTRA</th> <th style="width: 25%;">RATE</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>33 - 20 =</td> <td>13</td> <td>x \$18.00</td> </tr> <tr> <td>Independent Claims</td> <td>4 - 3 =</td> <td>1</td> <td>x \$88.00</td> </tr> <tr> <td colspan="2"><b>MULTIPLE DEPENDENT CLAIMS(S) (if applicable)</b></td> <td></td> <td>+ \$290.00</td> </tr> <tr> <td colspan="2"></td> <td></td> <td style="text-align: right;"><b>TOTAL OF ABOVE CALCULATIONS =</b></td> </tr> <tr> <td colspan="2"></td> <td></td> <td style="text-align: right;"><b>\$1272.00</b></td> </tr> </tbody> </table>                                                                                                                                                                                                               |                                                        |                                                  | CLAIMS                               | NUMBER FILED | NUMBER EXTRA | RATE | Total Claims | 33 - 20 = | 13 | x \$18.00 | Independent Claims | 4 - 3 = | 1 | x \$88.00 | <b>MULTIPLE DEPENDENT CLAIMS(S) (if applicable)</b> |  |  | + \$290.00 |  |  |  | <b>TOTAL OF ABOVE CALCULATIONS =</b> |  |  |  | <b>\$1272.00</b> |
| CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | NUMBER FILED                                           | NUMBER EXTRA                                     | RATE                                 |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| Total Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 33 - 20 =                                              | 13                                               | x \$18.00                            |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| Independent Claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4 - 3 =                                                | 1                                                | x \$88.00                            |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <b>MULTIPLE DEPENDENT CLAIMS(S) (if applicable)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                        |                                                  | + \$290.00                           |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                        |                                                  | <b>TOTAL OF ABOVE CALCULATIONS =</b> |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                        |                                                  | <b>\$1272.00</b>                     |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by $\frac{1}{2}$ .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <b>SUBTOTAL =</b> <input style="width: 100px; border: 1px solid black;" type="text" value="636.00"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <p>Processing fee of <b>\$130.00</b> for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <b>TOTAL NATIONAL FEE =</b> <input style="width: 100px; border: 1px solid black;" type="text" value="636.00"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <p>Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00</b> per property</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <b>TOTAL FEES ENCLOSED =</b> <input style="width: 100px; border: 1px solid black;" type="text" value="636.00"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <input type="checkbox"/> <b>Amount to be refunded:</b> <input style="width: 50px; border: 1px solid black;" type="text"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <input type="checkbox"/> <b>charged:</b> <input style="width: 50px; border: 1px solid black;" type="text"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <p>a. <input checked="" type="checkbox"/> A check in the amount of <b><u>\$636.00</u></b> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <b><u>1234567</u></b> in the amount of <b><u>\$</u></b> to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposition Account No. <b><u>13-4365</u></b>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. <b>Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038.</p>                                                                                                                              |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <p><b>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <p>SEND ALL CORRESPONDENCE TO:</p> <p><b>Michael G. Johnston</b><br/>Moore &amp; Van Allen PLLC<br/>430 Davis Drive, Suite 500<br/>Morrisville, NC 27560-6832<br/>USA</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |
| <br>SIGNATURE<br>Michael G. Johnston<br>NAME<br>38,194<br>REGISTRATION NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                        |                                                  |                                      |              |              |      |              |           |    |           |                    |         |   |           |                                                     |  |  |            |  |  |  |                                      |  |  |  |                  |

10/516381  
DT15 REC ST/PTO 30 NOV 2004

EXPRESS MAIL CERTIFICATE

EXPRESS MAIL LABEL NUMBER: EV 584684950 US

Date of Deposit: November 30, 2004

First Named Inventor: Guenther Eissner

For: METHOD FOR THE PROTECTION OF ENDOTHELIAL AND EPITHCLIAL  
CELLS DURING CHEMOTHERAPY

I hereby certify that the following documents:

1. Transmittal Letter to the U.S. Designated/Elected Office (DO/EO/US) Concerning a Filing Under 35 U.S.C. 371;
2. Preliminary Amendment;
3. Copy of WO 03/101468 A1;
4. Check in the Amount of \$636.00;
5. Express Mail Certificate; and
6. Acknowledgment Postcard.

are being deposited in a single envelope with the United States Postal Services "Express Mail" service under 37 C.F.R. 1.10 on the date indicated above and such envelope is addressed to:

Mail Stop: PCT DO/US, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Kim Oakley  
(Name of Person Mailing Documents)

KL Oakley  
(Signature of Person Mailing Documents)